



Copper Mountain College  
Financial Aid Office  
**2020-2021**

**Dependency Override  
REQUEST FOR INDEPENDENT STATUS**

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Student Name (Last, First, M.I.)

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Student ID #

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Mailing Address

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Current Telephone #

Independent Status Definition:

If you do not meet any of the conditions for independent status outlined by the federal government on the FAFSA you may appeal if you believe you have extenuating circumstances. These are generally **severe circumstances** within your family that prevent you from obtaining your parent's financial information. This will apply to situations where the **student's physical or emotional welfare is jeopardized** by contact with the parent(s). If you would like the financial aid office to **consider** a dependency override, which eliminates the requirement for parental information on the FAFSA, you must be able to **explain** and **document** the circumstances.

None of the conditions listed below, singly or in combination, qualify as unusual circumstances meriting a dependency override:

- Parents refuse to contribute to the student's education
- Parents are unwilling to provide information on the FAFSA or for verification
- Parents do not claim the student as a dependent for income tax purposes
- Student demonstrates total self-sufficiency

Unusual Circumstances do include:

- An abusive family environment
- Abandoned by parents (students between the ages of 21 and 24)

**(OVER)**

If you feel that you have severe circumstances, please submit the following documentation to the Financial Aid Office:

1. **A personal letter** describing in detail your severe circumstances (timeline form is most helpful). Include the following information:
  - What are your present living arrangements (who do you live with, how much rent do you pay each month?) and since what date?
  - How do you support yourself and meet your living expenses?
  - Why are your parents no longer able to support you?
2. **A letter from a professional** detailing your severe circumstances. Examples of a professional would be a high school counselor, caseworker, therapist, member of the clergy, etc. This letter must be on official letterhead and include the following information:
  - The length of time the person has known you
  - How the person is aware of your situation
  - Why the parental support is not available (to the best of their knowledge)
3. **A letter from a third party** detailing your severe circumstances. Examples of a third party could be another professional, aunt, uncle, grandparent, family friend, etc.
4. **Other supporting documentation** such as police reports or court orders, as it applies to you.

I hereby certify that all information contained in this request for dependency override is true and complete. I understand that providing false statements or fraudulent documentation will prevent me from receiving financial aid and may lead to fines and/or imprisonment.

**I understand that as with the FAFSA, I will be required to re-certify this information every year that I apply for financial aid.**

I UNDERSTAND THAT IF I MOVE BACK WITH MY PARENTS OR RECEIVE ANY KIND OF SUPPORT FROM THEM; I MUST REPORT THIS TO THE FINANCIAL AID OFFICE IMMEDIATELY.

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Student Signature

Date